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no persons are required to respond to a collection of information unless it displays a valid OMB control number Under the Panerwork Reduction Act of 19 Complete if Known Effective on 12/08/2004 PARTIAL FEBRUARY Fees pursuant to the Consolidated Appropriations Act 2005 (H.R. 4818). 10/019,606 Application Number TRANSMIT 1, May 2002 Filing Date Andrew Hill For FY 2005 First Named Inventor **Examiner Name** Bruce F. Bell Applicant claims small entity status. See 37 CFR 1.27 1746 Art Unit Conf 8030 2,000.00 S1011/20126 TOTAL AMOUNT OF PAYMENT Attorney Docket No. METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 03-0075 Deposit Account Name: Caesar, Rivise et al. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) ✓ Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) ✓ Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **EXAMINATION FEES FILING FEES** SEARCH FEES **Small Entity** Small Entity Small Entity Fees Paid (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) 200 Utility 300 150 500 250 100 200 130 100 100 50 65 Design 200 300 160 Plant 100 150 80 300 500 250 600 300 Reissue 150 200 0 0 Provisional 100 **Small Entity** 2. EXCESS CLAIM FEES Fee (\$) Fee (\$) Fee Description 50 25 Each claim over 20 (including Reissues) 200 100 Each independent claim over 3 (including Reissues) 180 360 Multiple dependent claims Total Claims Multiple Dependent Claims Fee Paid (\$) **Extra Claims** Fee (\$) Fee Paid (\$) Fee (\$) _ - 20 or HP = HP = highest number of total claims paid for, if greater than 20. Fee Paid (\$) Extra Claims Fee (\$) 200 800.00 - 3 or HP = 4 HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s) Number of each additional 50 or fraction thereof Fee Paid (\$) Total Sheets Extra Sheets _ (round up to a whole number) x - 100 = 4. OTHER FEE(S) Fees Paid (\$) Non-Enstials Specifications x \$130 fee (no small centity discount)x <u> 180.0</u>0 IDS Filing Fee \$1,020.00 Three Month Petition for Ext Other (e.g., late filing surcharge):

SUBMITTED BY	Ω_{α}	1		 			
Signature	7hm		Registration N (Attorney/Agent)	Telep	hone 215-56	7-2010	
Name (Print/Type)	/Gary A	. Greene		 Date	April	14,	2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Two cited references

e required to respond to a collection of information unless it displays a valid OMB control number. Under the Paperwork Reduction no per MADEMA Application Number 10/019,606 Filing Date May 1, 2002 TRANSMITTAL Andrew Hill First Named Inventor **FORM** Art Unit Conf. 8030 1746 **Examiner Name** Bruce F. Bell(to be used for all correspondence after initial filing) Attorney Docket Number S1011/20126 Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance Communication to TC Fee Transmittal Form Drawing(s) Appeal Communication to Board Licensing-related Papers of Appeals and Interferences Fee Attached Appeal Communication to TC Petition (Appeal Notice, Brief, Reply Brief) Amendment/Reply Petition to Convert to a Proprietary Information **Provisional Application** After Final Power of Attorney, Revocation Status Letter Change of Correspondence Address Affidavits/declaration(s) Other Enclosure(s) (please Identify Three Month Extension of Time Request

Terminal Disclaimer

Request for Refund

Remarks

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

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Printed name	GARY A: GREENE		
Date	April 14, 2005	Reg. No.	38,897
	CERTIFICATE OF 1	RANSMISSION/MAII	LING
I hereby certify t sufficient postag the date shown	hat this correspondence is being facsimile transmitt ge as first class mail in an envelope addressed to: C below:	ed to the USPTO or deposi ommissioner for Patents, P	ted with the United States Postal Service with .O. Box 1450, Alexandria, VA 22313-1450 on
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This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to Process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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